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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF RHODE ISLAND	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this a amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Kristin First name M Middle name Allard Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
	moding with the trustee.		
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4316	

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Case number (if known)

Debtor 1 Kristin M Allard

		About Debtor 1:	ļ	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)		☐ I have not used any business name or EINs. Business name(s)			
		EINs	E	EINs			
5.	Where you live	11 Dexter St	li	f Debtor 2 lives at a different address:			
		Providence, RI 02909-1203 Number, Street, City, State & ZIP Code	٨	Number, Street, City, State & ZIP Code			
		Providence County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	N	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Kristin M Allard

ar	t 2: Tell the Court About	our E	Bankruptcy Ca	se						
7.	The chapter of the Bankruptcy Code you are				n of each, see <i>No</i> of page 1 and che			42(b) for Individuals	Filing for Bankrup	otcy
	choosing to file under	Chapter 7								
			Chapter 11							
			Chapter 12							
			Chapter 13							
3.	How you will pay the fee		about how yo	u may pay. Ty attorney is sub	pically, if you are	paying the fe	ee yourself, you m	rk's office in your loc ay pay with cash, ca ney may pay with a c	shier's check, or n	noney
					stallments. If you nts (Official Form		option, sign and a	ttach the Application	n for Individuals to	Pay
			but is not requapplies to you	uired to, waive ir family size a	your fee, and mand you are unable	ay do so only le to pay the	if your income is I fee in installments	re filing for Chapter ess than 150% of th). If you choose this B) and file it with you	e official poverty li option, you must f	ine that
) .	Have you filed for bankruptcy within the	■ N	0.							
	last 8 years?	ПΥ	es.							
			District					Case number		
			District			When		Case number		
			District			When		Case number		
10.	Are any bankruptcy	■ N	0							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	□ Y	es.							
	affiliate?									
			Debtor			When		Relationship to you Case number, if kno		
			District Debtor			wilen		Relationship to you		
			District			When		Case number, if kno		
			2.001						····· <u></u>	
11.	Do you rent your residence?	■ N	o. Go to li	ne 12.						
		ПΥ	es. Has yo	ur landlord ob	tained an evictior	n judgment ag	gainst you?			
				No. Go to line	e 12.					
				Yes. Fill out Inthis bankrupto		About an Evic	tion Judgment Aga	ainst You (Form 101	A) and file it as pa	ırt of

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Case number (if known) Debtor 1 Kristin M Allard

art	3: Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.					
		☐ Yes.	Name	and location of bus	siness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name						
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	te & ZIP Code				
	it to this petition.		Check	the appropriate bo	x to describe your business:				
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))				
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))				
				None of the above					
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you in is, cash-flo .C. 1116(dicate that you are ow statement, and f 1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	No.	I am not filing under Chapter 11.						
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
art	4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention				
14.	Do you own or have any	■ No.							
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?					
	public health or safety? Or do you own any								
	property that needs immediate attention?			iate attention is why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?					
					Number, Street, City, State & Zip Code				

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Debtor 1 Kristin M Allard

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 1:18-bk-10820 Doc 1 Filed 05/09/18 Entered 05/09/18 18:03:12 Desc Main Document Page 6 of 54

Case number (if known) Debtor 1 Kristin M Allard Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kristin M Allard Signature of Debtor 2 Kristin M Allard Signature of Debtor 1 Executed on May 9, 2018 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Kristin M Allard Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Peter G	6. Berman, Esquire	Date	May 9, 2018	
Signature of	f Attorney for Debtor		MM / DD / YYYY	
Peter G. B	Berman, Esquire 2030			
Printed name	·	·	·	
Raskin &	Berman			
Firm name				
116 East N	Manning Street			
Providence	ce, RI 02906			
Number, Street,	, City, State & ZIP Code			
Contact phone	401-421-1363	Email address	mail@raskinberman.com	
2030 RI				
Bar number & S	State			

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	384,442.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	20,200.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	404,642.00
Pa	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	218,202.29
	Your total liabilities	\$	218,202.29
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,742.16
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,316.00
Pa	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Kristin M Allard

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 2,190.61 \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$_	50,037.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	50,037.00

Fill in t	his information to ide	entify yo	our case and th		ument	Page 10 d					
Debtor [*]		VI Allar									
Debtor 2	First Name		Middle	e Name		Last Name					
Spouse, i			Middle	e Name		Last Name					
Jnited S	States Bankruptcy Cou	ırt for th	ie: DISTRICT	OF RHC	DDE ISLAND						
Case nu	umber					_					Check if this is ar amended filing
Schon each chink it fit	edule A/B: rategory, separately list ts best. Be as complete ion. If more space is necessary question.	Pro	cribe items. List a	le. If two	married people	are filing togeth	er, both are	equally respo	nsible for su	ıpplyi	ng correct
Part 1:	Describe Each Residen	ce, Buil	ding, Land, or Ot	her Real	Estate You Ow	n or Have an Int	erest In				
. Do yo	u own or have any legal	or equi	table interest in a	any resid	ence, building,	land, or similar	property?				
_	. Go to Part 2.	•		•	· -						
LINO.	. G0 10 Fail 2.										
Yes	s. Where is the property?										
	s. Where is the property?			What		6 5 - 10 - 1					
1.1	s. Where is the property? Dexter St			What		/? Check all that app	ily	Do not dod.	ent accounted along	cime o	er exemptions Dut
1.1 11			noito	What ■ □	Single-family h	nome	ıly	the amount	of any secure	d clai	or exemptions. Put ms on <i>Schedule D:</i> ccured by Property.
1.1 11 Stre	Dexter St eet address, if available, or other	her descrip	02909-1203		Single-family h Duplex or mult Condominium Manufactured Land	nome ti-unit building or cooperative or mobile home	ily	the amount Creditors W Current val entire proper	of any secure tho Have Clain ue of the erty?	ed claii ms Se Cu	ms on Schedule D: coured by Property. rrent value of the rtion you own?
1.1 11 Stre	Dexter St eet address, if available, or other	her descrip			Single-family h Duplex or mult Condominium Manufactured	nome ti-unit building or cooperative or mobile home	ıly	the amount Creditors W Current val entire prop	of any secure the Have Claim the Have of the erty?	ed claii ms Se Cu po	ms on Schedule D: cured by Property. rrent value of the rtion you own? \$384,442.00
1.1 11 Stre	Dexter St eet address, if available, or other	her descrip	02909-1203		Single-family h Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other has an interest	nome ti-unit building or cooperative or mobile home		Current val entire prop \$38 Describe th (such as fe a life estate	of any secure the Have Clais use of the serty? 4,442.00 se nature of ye simple, ten sin, if known.	cu claii cu cu cu cu cu cur cur cur cur cur cur cur	ms on Schedule D: coured by Property. rrent value of the rtion you own?
1.1 Stree Pr City	Dexter St eet address, if available, or other	her descrip	02909-1203		Single-family h Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other has an interest Debtor 1 only	nome ti-unit building or cooperative or mobile home		Current val entire prop \$38 Describe th (such as fee	of any secure the Have Clais use of the serty? 4,442.00 se nature of ye simple, ten sin, if known.	cu claii cu cu cu cu cu cur cur cur cur cur cur cur	rrent value of the rtion you own? \$384,442.00
1.1 Stree Pr City	Dexter St eet address, if available, or other standards or other stand	her descrip	02909-1203		Single-family h Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other has an interest Debtor 1 only Debtor 2 only Debtor 1 and I	nome ti-unit building or cooperative or mobile home operty	Check one	Current val entire prop \$38 Describe th (such as fe a life estate Sole Own	of any secure the Have Clais use of the serty? 4,442.00 se nature of ye simple, ten sin, if known.	Cu por your o	rrent value of the rtion you own? \$384,442.00 whereship interest by the entireties, or
1.1 Stree Pr City	Dexter St eet address, if available, or other covidence y	her descrip	02909-1203		Single-family h Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other has an interest Debtor 1 only Debtor 2 only Debtor 1 and D At least one of	nome ti-unit building or cooperative or mobile home operty in the property? Debtor 2 only if the debtors and a ou wish to add al	Check one	Current valentire properties the same state of the control of the	of any secure the Have Clair use of the erty? 4,442.00 se nature of ye simple, ten on, if known. The ructions is contructions	Cu por your o	rrent value of the rtion you own? \$384,442.00 whereship interest by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Case number (if known) Document Debtor 1 Kristin M Allard 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevrolet Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Impala** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2012 Year: Debtor 2 only Current value of the Current value of the 200,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$2,000.00 \$2,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$2,000.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... **Household Goods** \$10,000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Electronics \$1,000.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles □ No Yes. Describe..... Misc \$100.00 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No

Yes. Describe.....

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Debtor 1	Kristin M Al	llard		Ca	ase number (if known)	
		Misc				\$100.00
10. Firear <i>Exam</i>		es, shotguns, ammunitic	on, and related equipme	nt		
■ No	Describe	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
_		lothes, furs, leather coa	ats, designer wear, shoe	s, accessories		
□ No ■ Yes	Describe					
		Wearing Apparel				\$1,200.00
☐ No		ewelry, costume jewelry	r, engagement rings, wed	dding rings, heirloom jewe	elry, watches, gems, g	old, silver
		Jewelry				\$5,000.00
Exam □ No	arm animals ples: Dogs, cats, Describe	birds, horses				
		Household Pets				Unknown
■ No □ Yes.	Give specific in	formation		including any health aid any entries for pages yo		\$17,400.00
	escribe Your Finar					
Do you o	wn or have any	legal or equitable inte	erest in any of the follow	wing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No			your home, in a safe dep	posit box, and on hand wh	nen you file your petitic	n
					Cash	\$100.00
Exam			ial accounts; certificates ccounts with the same in	of deposit; shares in crecistitution, list each.	lit unions, brokerage h	ouses, and other similar
□ No ■ Yes.			Institution	name:		
		17.1. Checking	account RI Credi	t Union		\$200.00

Official Form 106A/B

Case 1:18-bk-10820 Doc 1 Filed 05/09/18 Entered 05/09/18 18:03:12

Document Page 13 of 54 Case number (if known) Debtor 1 Kristin M Allard **RI Credit Union** \$500.00 Savings account 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No Yes. Give specific information about them..... Name of entity: % of ownership: J&K Acquisitions and Holdings, Inc. - All assets 50 \$0.00 are taken by secured creditors. % 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured Case 1:18-bk-10820 Doc 1 Filed 05/09/18 Entered 05/09/18 18:03:12 Desc Main Document Page 14 of 54

. Case number (if known) Debtor 1 Kristin M Allard claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Term Life Insurance (No Cash Value) \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$800.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Part 6 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

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Case number (if known) Document Debtor 1 Kristin M Allard ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$384,442.00 Part 2: Total vehicles, line 5 \$2,000.00 Part 3: Total personal and household items, line 15 \$17,400.00 Part 4: Total financial assets, line 36 58. \$800.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$20,200.00 Copy personal property total \$20,200.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$404,642.00

Official Form 106A/B Schedule A/B: Property page 6

		17/1/11111	$\cdots \cdots \cdots \cdots \cdots \cdots$	
Fill in this infor	mation to identify your	case:		
Debtor 1	Kristin M Allard			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF RHODE	SLAND	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
\$384,442.00		\$384,442.00	R.I. Gen. Laws § 9-26-4.1
		100% of fair market value, up to any applicable statutory limit	
\$2,000.00		\$2,000.00	R.I. Gen. Laws § 9-26-4(13)
		100% of fair market value, up to any applicable statutory limit	
\$10,000.00		\$9,600.00	R.I. Gen. Laws § 9-26-4(3)
		100% of fair market value, up to any applicable statutory limit	
\$10,000.00		\$400.00	R.I. Gen. Laws § 9-26-4(16)
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	R.I. Gen. Laws § 9-26-4(16)
		100% of fair market value, up to any applicable statutory limit	
	\$384,442.00 \$384,442.00 \$10,000.00 \$10,000.00	\$384,442.00	\$384,442.00 \$384,442.00 \$384,442.00 \$100% of fair market value, up to any applicable statutory limit \$10,000.00 \$100% of fair market value, up to any applicable statutory limit \$10,000.00 \$100% of fair market value, up to any applicable statutory limit \$10,000.00 \$100% of fair market value, up to any applicable statutory limit \$10,000.00 \$100% of fair market value, up to any applicable statutory limit \$10,000.00 \$100% of fair market value, up to any applicable statutory limit \$1,000.00 \$1,000.00 \$1,000.00

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Kristin M Allard Case number (if known)

Del	ebtor 1 Kristin M Allard	Document		Case number (if known)	
	Brief description of the property and line Schedule A/B that lists this property	portion you own Copy the value from		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Misc	Schedule A/B \$100.00		\$100.00	R.I. Gen. Laws § 9-26-4(16)
	Line from Schedule A/B: 8.1		_	100% of fair market value, up to any applicable statutory limit	
	Misc Line from Schedule A/B: 9.1	\$100.00		\$100.00	R.I. Gen. Laws § 9-26-4(16)
	Line Holli Scredule A/B. 3.1			100% of fair market value, up to any applicable statutory limit	
	Wearing Apparel Line from Schedule A/B: 11.1	\$1,200.00		\$1,200.00	R.I. Gen. Laws § 9-26-4(1)
	Line IIoiii Scredule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
	Jewelry Line from Schedule A/B: 12.1	\$5,000.00		\$2,000.00	R.I. Gen. Laws § 9-26-4(14)
	Line Holli Scredule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	
	Jewelry Line from Schedule A/B: 12.1	\$5,000.00		\$3,000.00	R.I. Gen. Laws § 9-26-4(16)
	Line Holli Golleddie A.D. 12.1			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$100.00		\$100.00	R.I. Gen. Laws § 9-26-4(16)
	Line Holli Golledale A/D. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking account: RI Credit Uni	on \$200.00		\$200.00	R.I. Gen. Laws § 9-26-4(16)
	Line Holli Schedule Arb. 17.1			100% of fair market value, up to any applicable statutory limit	
	Savings account: RI Credit Unio Line from Schedule A/B: 17.2	n \$500.00		\$500.00	R.I. Gen. Laws § 9-26-4(16)
	Line Holli Golleddie AVD. 11.2			100% of fair market value, up to any applicable statutory limit	
	Term Life Insurance (No Cash Va	alue) \$0.00			R.I. Gen. Laws §§ 27-4-11, 27-4-12, 27-18-24
	Line Holli Schedule A/B. 31.1			100% of fair market value, up to any applicable statutory limit	21-4-12, 21-10-24
3.	Are you claiming a homestead exem (Subject to adjustment on 4/01/19 and No Yes. Did you acquire the property No Yes	every 3 years after that for ca	ses fi	led on or after the date of adjustmen	,

		12111111		
Fill in this infor	mation to identify your	case:		
Debtor 1	Kristin M Allard			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF RHODE	SLAND	
Case number				
(if known)				☐ Check if this is amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Ou	30 1.10 BK 10020	Document	t Page 19	nf 54	00.12	COO MAIN
Fill in this int	formation to identify your o					
Debtor 1	Kristin M Allard					
20010.	First Name	Middle Name	Last Name			
Debtor 2	E N	No. 1 II. No.				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	DISTRICT OF RHODE ISL	_AND			
Case number (if known)					_	heck if this is an mended filing
	orm 106E/F e E/F: Creditors W	ho Have Unsecur	ed Claims			12/15
Schedule G: Ex Schedule D: Creeft. Attach the name and case Part 1: Lis 1. Do any cre	contracts or unexpired leases recutory Contracts and Unexpireditors Who Have Claims Secu Continuation Page to this pagnumber (if known). St All of Your PRIORITY Undeditors have priority unsecured	ired Leases (Official Form 106 Ired by Property. If more spac e. If you have no information t secured Claims	G). Do not include a e is needed, copy the	any creditors with partially s he Part you need, fill it out,	secured claims number the ent	that are listed in ries in the boxes on the
No. Go	to Part 2.					
☐ Yes.						
Part 2: Lis	st All of Your NONPRIORIT	Y Unsecured Claims				
☐ No. You	editors have nonpriority unsecut have nothing to report in this paragraph of the properties of the pro	art. Submit this form to the court			tor has more tha	n one nonpriority
unsecured	claim, list the creditor separately reditor holds a particular claim, list	for each claim. For each claim I	listed, identify what ty	pe of claim it is. Do not list cla	aims already inc	luded in Part 1. If more
						Total claim
4.1 Allst	ate Insurance Company	Last 4 digits of	f account number	8159		\$417.90
Attn: PO E	iority Creditor's Name : Bankruptcy Dept Box 4310 ol Stream, IL 60197-4310		debt incurred?			
Numbe	er Street City State Zlp Code ncurred the debt? Check one.		you file, the claim is	s: Check all that apply		
■ De	ebtor 1 only	☐ Contingent				
☐ De	ebtor 2 only	☐ Unliquidated	t			
☐ De	ebtor 1 and Debtor 2 only	☐ Disputed				
☐ At	least one of the debtors and and	uici	RIORITY unsecured	claim:		
	eck if this claim is for a comn					
debt Is the	claim subject to offset?	Obligations a report as priority		ration agreement or divorce th	nat you did not	
■ No	•			g plans, and other similar deb	ts	
— No		•	ify In Collection	31 ,		
∟ re	3	Other. Spec	III CONECTION	,		-

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Debtor	1 Kristin M Allard		Case number (if know)	
4.2	Barclays Bank Delaware	Last 4 digits of account number	9224	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy Dept PO Box 8801	When was the debt incurred?	Opened 08/16/2015	
	Wilmington, DE 19899-8801 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	I - In Collections	
4.3	Citibank SD, N.A./Rosssmns Nonpriority Creditor's Name	Last 4 digits of account number	6295	\$516.00
	Attn: Centralized Bankruptcy PO Box 790040 Saint Louis, MO 63179-0040	When was the debt incurred?	Opened 06/2015	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	·		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sena	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	nation agreement of alveree that you are not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.4	Comenity Bank/Pottery Barn Nonpriority Creditor's Name	Last 4 digits of account number	6066	\$1,701.00
	Attn: Bankruptcy Dept Po Box 182125	When was the debt incurred?	Opened 08/2014	
	Columbus, OH 43218-2125 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,	, and an area of the second of	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	

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Kristin W Allard		Case number (if know)	
Comenity Bank/Williams Visa	Last 4 digits of account number	8051	Unknown
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 182125	When was the debt incurred?	Opened 08/16/2015	
Columbus, OH 43218-2125 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Credit Card	- In Collections	
Eastern Security Corporation	Last 4 digits of account number		\$1,539.52
Nonpriority Creditor's Name 307 Branch Ave Providence, RI 02904	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed □		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Sixth Divisi Small Clain 6SC-2017-0		
Great Lakes Higher Ed Corp	Last 4 digits of account number	77777	\$24,385.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 7860	When was the debt incurred?	Opened 12/2017	
Nadison, WI 53707-7860 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	По и		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
At least one of the debtors and another	Student loans	a oldiiii.	
Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin		
No	■ Dedts to bension or profit-sharin	y pians, and other similar debts	
Yes	☐ Other. Specify	51	

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Debioi	Kristin W Allard		Case number (if know)	
4.8	Great Lakes Higher Ed Corp	Last 4 digits of account number	7777	\$25,652.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept	When was the debt incurred?	Opened 12/2017	
	Po Box 7860 Nadison, WI 53707-7860 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	i s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
	— ,,,,,	Student Lo	an	
4.9	National Grid Nonpriority Creditor's Name	Last 4 digits of account number	1006	\$121.15
	Attn: Bankruptcy Dept PO Box 960	When was the debt incurred?		
	Northborough, MA 01532-0960			
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Utility		
4.1	National Grid	Last 4 digits of account number	0042	\$1,373.12
	Nonpriority Creditor's Name	When was the debt incurred?		
	Attn: Bankruptcy Dept PO Box 960 Northborough, MA 01532-0960	When was the dest incurred:		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other Specify Utility		
		- Other Specify		

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Debtor 1 Kristin M Allard Case number (if know) 4.1 **National Grid** 4031 \$267.56 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept When was the debt incurred? **PO Box 960** Northborough, MA 01532-0960 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Utility 4.1 **National Grid** 6049 \$267.56 Last 4 digits of account number 2 Nonpriority Creditor's Name Attn: Bankruptcy Dept When was the debt incurred? PO Box 960 Northborough, MA 01532-0960 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Utility 4.1 **National Grid** 7007 \$106.37 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Dept When was the debt incurred? PO Box 960 Northborough, MA 01532-0960 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Utility

Official Form 106 E/F

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Debtor 1 Kristin M Allard Case number (if know) 4.1 Nordstrom FSB/TD Bank 5374 \$819.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 08/2014 When was the debt incurred? Po Box 6555 Englewood, CO 80155-6555 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.1 **Providence Tax Collector** \$11,168.68 Last 4 digits of account number 5 Nonpriority Creditor's Name Law Department 2016 When was the debt incurred? 444 Westminster St Ste 220 Providence, RI 02903 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Real Estate Taxes ☐ Yes 4.1 **Rhode Island Medical Imaging** 0933 \$122.92 Last 4 digits of account number 6 Nonpriority Creditor's Name fka The Imaging Institute When was the debt incurred? 20 Catamore Blvd East Providence, RI 02914-1204 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bill ☐ Yes

Official Form 106 E/F

Debtor	1 Kristin M Allard	Document Page 25 of 54 Case number (if know)	
4.1	Shamrock Finance LLC	Last 4 digits of account number	\$148,343.00
7	Nonpriority Creditor's Name Attn: Bankruptcy Dept 116 Topsfield Rd	When was the debt incurred?	ψ. 15,5 1515
	Wenham, MA 01984 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Personal Guaranty of Business Obligation of J&K Acquisitions and Holdings, Inc. Providence County Superior Court PC-2018-0449	
4.1	Verizon Wireless	Last 4 digits of account number 0001	\$1,239.51
	Nonpriority Creditor's Name Attn: Bankruptcy Dept 500 Technology Dr Ste 550 Weldon Springs, MO 63304	When was the debt incurred? Opened 07/2013	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Utility	
4.1 9	Work Out World-East Providence Nonpriority Creditor's Name	Last 4 digits of account number	\$162.00
	1925 Pawtucket Ave East Providence, RI 02914	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Fitness Club Membership - In Collections	

Part 3: List Others to Be Notified About a Debt That You Already Listed

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5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency

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Debtor 1	Kristin M Allard		Case number (if know)

is trying to collect from you for a debt you owe to	someone else, list the original credit hat you listed in Parts 1 or 2, list the	or in Parts 1 or 2, then list the collection agency here. Similarly, if you additional creditors here. If you do not have additional persons to be		
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Credit Collection Services	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
Attn: Bankruptcy Dept 725 Canton Street Norwood. MA 02062		Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did	I you list the original creditor?		
Diana E. Pearson, Esquire	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
1050 Main St #2 PO Box 178		■ Part 2: Creditors with Nonpriority Unsecured Claims		
East Greenwich, RI 02818				
Lust Greenwich, Ki 02010	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did	I you list the original creditor?		
First Credit Services	Line 4.19 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims		
Attn: Bankruptcy Dept 377 Hoes Lane Ste 200 Piscataway, NJ 08854		Part 2: Creditors with Nonpriority Unsecured Claims		
1 Iscalaway, No 00054	Last 4 digits of account number	1556		
Name and Address	On which entry in Part 1 or Part 2 did	l you list the original creditor?		
Marc D. Wallick, Esquire	Line 4.17 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims		
WALLICK & ASSOCIATES, LTD. 51 Jefferson Blvd Ste 500 Warwick, RI 02888-1070		Part 2: Creditors with Nonpriority Unsecured Claims		
1101 WICK, IXI 02000-1070	Last 4 digits of account number			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim	
	6a.	Domestic support obligations	6a.	\$ 0.00	0
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00	0
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00	_
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00	_
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$0.00	<u> </u>
	6f.	Student loans	6f.	Total Claim \$ 50,037.0	Λ
Total claims	OI.	otachi isans	Oi.	Φ <u>50,037.00</u>	<u>U</u>
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00	0
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00	0
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 168,165.29	9
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 218,202.29	9_

		I A A A I I I I I I	111 11111.77 (11 1) 4	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Kristin M Allard			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF RHODE	SLAND	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	J.,		State		

		Document	Page 28 of	54	
Fill in this info	rmation to identify your c	ase:			
Debtor 1	Kristin M Allard				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	DISTRICT OF RHODE ISLAN	טו		
Case number (if known)					☐ Check if this is an amended filing
	orm 106H e <mark>H: Your Cod</mark> e	ebtors			12/15
people are filin ill it out, and n your name and	g together, both are equa umber the entries in the b case number (if known).	oxes on the left. Attach the A	correct information Additional Page to t	n. If more space is need this page. On the top of	ded, copy the Additional Page,
_	()				
□ No					
Yes					
		lived in a community property Nevada, New Mexico, Puerto R			ates and territories include
■ No. Go t		se, or legal equivalent live with	you at the time?		
in line 2 aç	gain as a codebtor only if D), Schedule E/F (Official I	that person is a guarantor or	cosigner. Make su	ire you have listed the o	rith you. List the person shown creditor on Schedule D (Official hedule E/F, or Schedule G to fill
	mn 1: Your codebtor Number, Street, City, State and ZIP	Code		Column 2: The credite Check all schedules the	or to whom you owe the debt nat apply:
11 D	Acquisitions and Hold exter St vidence, RI 02909	lings		☐ Schedule D, line ■ Schedule E/F, lin ☐ Schedule G	ne <u>4.17</u>
				Shamrock Finance	

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Fill	in this information to i	dentify your ca	ase.				1				
		Kristin M All									
	btor 2					_					
Uni	ited States Bankruptcy	Court for the	DISTRICT OF RHODI	E ISLAND							
	se number 						□ A		ed filing ent showin	g postpetition ollowing date:	
0	fficial Form 1	061					N	/IM / DD/ \	YYYY		
S	chedule I: Y	our Inco	ome								12/15
spo atta	use. If you are separ ch a separate sheet	ated and you to this form. (Employment	are married and not filli r spouse is not filling wi On the top of any additi	ith you, do not inclu	ıde infor	mati	on abou	t your spo umber (if	ouse. If mo known). A	ore space is	needed,
		an ana iah		■ Employed				☐ Empl		ing spouse	
	If you have more than one job, attach a separate page with information about additional		Employment status	■ Employed □ Not employed					mployed		
	employers.		Occupation	Bus Driver							
	Include part-time, se self-employed work.		Employer's name	Durham School	l Servic	es					
	Occupation may incor homemaker, if it a		Employer's address								
De	Cina Datai	la Abaut Maura	How long employed the	here? 8 Mont	hs			_			
Esti spoi	imate monthly incomuse unless you are se	parated. ouse have mo	ate you file this form. If you	, c	·		·		·	·	J
mor	e space, attach a sepa	arate sheet to	this form.				For Del	btor 1		btor 2 or ng spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$	2	,271.77	\$	N/A	
3.	Estimate and list n	nonthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Inc	come. Add lin	e 2 + line 3.		4.	\$	2,2	71.77	\$	N/A	

Debt	or 1	Kristin M Allard	-	Case	number (if known)				
	0		4	For	Debtor 1	no	r Debtor n-filing s	pouse	
	Сор	y line 4 here	4.	Φ_	2,271.77	. \$_		N/A	_
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	529.61	. \$_		N/A	_
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	. \$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	. \$_		N/A	_
	5e.	Insurance	5e.	\$	0.00	\$_		N/A	_
	5f.	Domestic support obligations	5f.	\$_	0.00	. \$_		N/A	_
	5g.	Union dues	5g.	\$	0.00	. \$_		N/A	_
	5h.	Other deductions. Specify:	_ 5h.+	· \$	0.00	+ \$_		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	529.61	\$_		N/A	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,742.16	. \$_		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		N/A	_
	8d.	Unemployment compensation	8d.	\$	0.00	\$		N/A	_
	8e.	Social Security	8e.	\$	0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f.	\$ \$	0.00	\$_ . \$_		N/A	_
	8g. 8h.		8g. 8h.+	· —	0.00			N/A	_
	OII.	Other monthly income. Specify:	_ 011.7	Ψ_	0.00	- Ψ		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_		N/A	A
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$		1,742.16 + \$		N/A	= \$	1,742.16
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	Ľ					Ľ.	.,.
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule are contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not acity:	depen	•	,	,			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					e. 12.	\$	1,742.16
								Combi	
13.	Do y ■ □	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?					monthl	y income

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Fill in this	s information to identify y	our case:			1		
Debtor 1	Kristin M Al				Che	eck if this is:	
D 11 0	10001111170	iui u				An amended filing	
Debtor 2 (Spouse,	if filing)					A supplement shown 13 expenses as of	ving postpetition chapter the following date:
United Sta	ates Bankruptcy Court for the	: DISTRI	CT OF RHODE ISLAND			MM / DD / YYYY	
Case num (If known)							
Offici	al Form 106J				•		
Sche	edule J: Your	Expen	ises				12/1
Be as co	mplete and accurate as	s possible. eded, atta	If two married people ar ch another sheet to this	e filing together, be form. On the top of	oth are equ f any additi	ually responsible fo ional pages, write y	or supplying correct your name and case
Part 1:	Describe Your House	ehold					
_	his a joint case?						
•	No. Go to line 2. Yes. Does Debtor 2 live	in a senara	ate household?				
_	□ No	iii a sopait	ate nousenoid.				
		st file Officia	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Del	otor 2.	
2. Do	you have dependents?	■ No					
Do	not list Debtor 1 and otor 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
Do	not state the						□ No
dep	endents names.						☐ Yes
							□ No □ Yes
							□ No
							☐ Yes
							□ No
							☐ Yes
exp	your expenses include enses of people other t rself and vour depende	than 👝	No Yes				
you	_						
	s as of a date after the	our bankru	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the valu			government assistance it luded it on <i>Schedule I:</i> Y			Your exp	enses
(Omolai	1 01111 1001.)						
	e rental or home owners ments and any rent for th		ses for your residence. In r lot.	nclude first mortgag	e 4.	\$	0.00
lf n	ot included in line 4:						
4a.	Real estate taxes				4a.	\$	800.00
4b.	Property, homeowner				4b.		200.00
4c.	Home maintenance, re				4c.	·	150.00
4d.	Homeowner's associa		dominium dues p ur residence , such as ho	me equity loans	4d. 5.		0.00

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ebtor 1	Kristin M Allard	Case num	ber (if known)	
. Utilitie	es:			
	Electricity, heat, natural gas	6a.	\$	240.00
	Water, sewer, garbage collection	6b.	\$	75.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	205.00
6d.	Other. Specify:	6d.	\$	0.00
	and housekeeping supplies	7.	\$	300.00
	care and children's education costs	8.	\$	0.00
	ing, laundry, and dry cleaning	9.	\$	200.00
	nal care products and services	10.	\$	250.00
	al and dental expenses	11.	\$	0.00
	portation. Include gas, maintenance, bus or train fare.		Ψ	0.00
	t include car payments.	12.	\$	130.00
	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	200.00
	table contributions and religious donations	14.		200.00
5. Insura	<u> </u>		Ψ	
	t include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.	·	136.00
	Other insurance. Specify:	15d.		0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		<u> </u>	0.00
Specify		16.	\$	0.00
	lment or lease payments:			
	Car payments for Vehicle 1	17a.	·	100.00
	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify: Student Loans	17c.	\$	130.00
17d.	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as		•	0.00
	ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	. 18.	·	
	payments you make to support others who do not live with you.	19.	\$	0.00
Specify	,		····· Incomo	
	real property expenses not included in lines 4 or 5 of this form or on Sch Mortgages on other property	20a.		0.00
				0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.	·	0.00
. Other:	: Specify:	21.	+\$	0.00
	late your monthly expenses			
	dd lines 4 through 21.		\$	3,316.00
22b. C	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	3,316.00
	late your monthly net income.		•	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	1,742.16
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	3,316.00
23c.	Subtract your monthly expenses from your monthly income.			4 570 04
	The result is your monthly net income.	23c.	\$	-1,573.84
4 De 240	u expect an increase or decrease in your expenses within the year after y			
	ample, do you expect to finish paying for your car loan within the year or do you expect you	ur mortagae i	navment to increase	or decrease because of
For exa		ui illorigage į	Dayment to increase	0. 400.0400 2004400 0
For exa	ation to the terms of your mortgage?	ui mongage į	Jayment to increase	

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Fill in this inform	mation to identify your	case:			
Debtor 1	Kristin M Allard				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF RHODE ISL	LAND		
Case number _					
(if known)					☐ Check if this is an amended filing
If two married pe You must file thi obtaining money	eople are filing togethers	n Individual I r, both are equally responsible bankruptcy schedules on connection with a bankru 519, and 3571.	ible for supplying corre	ect information. Making a false statement,	
Sigi	n Below				
Did you pa	y or agree to pay some	one who is NOT an attorne	y to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person				Petition Preparer's Notice, ignature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the summa	ary and schedules filed	l with this declaration and	
X /s/ Kris	stin M Allard		X		
Kristin	M Allard		Signature of D	Debtor 2	
Signatu	re of Debtor 1				
Date _	May 9, 2018		Date		

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Fill	n this inform	nation to identify you	r case:			
Deb		Kristin M Allard	ouooi			
Den	101 1	First Name	Middle Name	Last Name		
Deb	tor 2 ise if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	kruptcy Court for the:	DISTRICT OF RHODE IS	SLAND		
Case (if kno	e number				_	Check if this is an amended filing
Sta	s complete a	of Financial		re filing together, both are	ankruptcy equally responsible for sup	
numl	ber (if known). Answer every ques	stion.		, , , , , , , , , , , , ,	
Part	<u> </u>		rital Status and Where You	Lived Before		
1.	wnat is your	current marital statu	IS?			
	■ Married■ Not mar	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor co, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	ificial Form 106H).		
Part	2 Explain	n the Sources of You	r Income			
	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No Fill	in the details.				
	Tes. Fili	in the details.				
			Debtor 1		Debtor 2	_
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$9,462.87	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

		Document	Page 35 of 54
Debtor 1	Kristin M Allard		Case number (if known)

				5 16		D 14 - 5		
				Debtor 1		Debtor 2		
	C		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco Check all that ap		Gross income (before deductions and exclusions)	
	r last calen anuary 1 to	dar year: December :	31, 2017)	■ Wages, commissions, bonuses, tips	\$5,627.00	☐ Wages, comm bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	usiness	
		dar year bef December 3		☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, comm bonuses, tips	nissions,	
				☐ Operating a business		Operating a b	usiness	
	and other winnings. List each s	public benef If you are fili	it payments; ng a joint cas he gross inco	pensions; rental income; inte e and you have income that	amples of other income are a rest; dividends; money collect you received together, list it outlety. Do not include income the	ted from lawsuits; ronly once under Deb	oyalties; and otor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)
	r last calen anuary 1 to	dar year: December :	31, 2017)	Work as a Real Estate Broker	\$350.00			
Pa		Debtor 1's Neither De individual p During the No. Yes * Subject to	or Debtor 2 ebtor 1 nor Debtor 2 erimarily for a 90 days befor Go to line 7 List below expaid that cru not include to adjustment or Debtor 2 of 90 days befor Go to line 7 List below exinclude pay	personal, family, or househouse personal, family, or househouse you filed for bankruptcy, do to be ach creditor to whom you part be ach creditor. Do not include payment payments to an attorney for to act on 4/01/19 and every 3 years to both have primarily consumer you filed for bankruptcy, do to be ach creditor to whom you part who was to be ach creditor to whom you part of you filed for bankruptcy.	r debts? umer debts. Consumer debts lid purpose." id you pay any creditor a total id a total of \$6,425* or more in nts for domestic support oblig his bankruptcy case. 's after that for cases filed on	I of \$6,425* or more none or more payn ations, such as chil or after the date of I of \$600 or more?	e? nents and the d support an adjustment. ou paid that	ne total amount you nd alimony. Also, do creditor. Do not
	Creditor'	s Name and	I Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this p	ayment for

Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Shamrock Finance LLC v. Kristen Collection **Providence County** Pending Allard Superior Court On appeal PC-2018-0449 **Licht Judicial Complex** □ Concluded 250 Benefit Street Providence, RI 02903-2719 Eastern Security Corp. v. Kristen M Collection Sixth Division District Court □ Pendina Allard Small Claims Division ☐ On appeal 6SC-2017-01424 250 Benefit Street □ Concluded Providence, RI 02903 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below Creditor Name and Address Describe the Property Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No П Yes

Case 1:18-bk-10820

Kristin M Allard

Debtor 1

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ase number (*if known*)

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Part	5: List Certain Gifts and Contributions	s		
	□ No	uptcy, did you give any gifts with a total value of more t	han \$600 per person	?
	Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$60 per person	0 Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
	Theresa Primo 11 Hudson St Providence, RI 02909-1706	Real Estate Located at 11 Hudson Street, Providence, RI	2016	Unknown
	Person's relationship to you: Aunt			
4. \	Within 2 years before you filed for bankru	uptcy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	■ No			
	Yes. Fill in the details for each gift or co	ontribution.		
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	ŕ	Dates you contributed	Value
Dort	<u> </u>			
Part	6: List Certain Losses			
	Within 1 year before you filed for bankru _l or gambling?	ptcy or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster
	-			
	No			
	Yes. Fill in the details.	Describe any incomens according for the loss	Data of wave	Value of managements
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
		Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .		
Part	7: List Certain Payments or Transfers	.		
			_	
(consulted about seeking bankruptcy or p	ptcy, did you or anyone else acting on your behalf pay or preparing a bankruptcy petition? reparers, or credit counseling agencies for services require		rty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not Y	transferred	or transfer was made	payment
	Raskin & Berman	ou		\$2,000.00
	116 E Manning St Providence, RI 02906-4310			v =,000.00
- 1		ptcy, did you or anyone else acting on your behalf pay litors or to make payments to your creditors? you listed on line 16.	or transfer any prope	rty to anyone who
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Case number (if known)

Debtor 1 Kristin M Allard

	Person Who Was Paid Address	Description and vertransferred	Description and value of any property transferred Date payment or transfer was made		or transfer was	Amount of payment
	Thomas E. Romano, Esquire 19 Franconia Dr Harrisville, RI 02830					\$800.00
	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers made include gifts and transfers that you have already I No Yes. Fill in the details.	iness or financial affa e as security (such as the	irs? ne granting of a se			
	Person Who Received Transfer Address Person's relationship to you	Description and voproperty transferr			any property or s received or debts schange	Date transfer was made
	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-prote ■ No □ Yes. Fill in the details.		y property to a so	elf-settled tr	ust or similar device o	of which you are a
	Name of trust	Description and v	alue of the prope	erty transfer	red	Date Transfer was made
	8: List of Certain Financial Accounts, Instr	-		_	n your name, or for you	ur banafit alasad
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa No Yes. Fill in the details.	other financial accour	its; certificates o	f deposit; s		
		ast 4 digits of ccount number	Type of account instrument	cl m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, any	safe depos	it box or other deposi	tory for securities,
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1 ye	ear before y	ou filed for bankruptc	y?
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		escribe the	contents	Do you still have it?

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Debtor 1 Kristin M Allard

Pai	t 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that someofor someone.	one else owns? Include any proper	ty you borrowed from, are storing fo	or, or hold in trust
	No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Pai	t 10: Give Details About Environmental Information	ation		
For	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground		
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	_	law, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wher	n they occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	nental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ronmental law? Include settlements	and orders.
	■ No			
	Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pai	t 11: Give Details About Your Business or Con	nections to Any Business		
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have ar	y of the following connections to an	y business?
	☐ A sole proprietor or self-employed in a t	trade, profession, or other activity,	either full-time or part-time	•
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing execut	tive of a corporation		
	☐ An owner of at least 5% of the voting or	equity securities of a corporation		

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	d fill in the details below for each business.			
Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.	
(Number, Street, Oity, State and 217 Code)	Name of accountant or bookkeeper	Dates bus	siness existed	
J&K Acquisitions and Holdings, Inc.	Used Car Business	EIN:		
11 Dexter St Providence, RI 02909-1203		From-To	September, 2016 - Spring, 2017	
	Debtor has a real estate license	EIN:		
	and has had occasional income.	From-To		
Danella Realty Holdings, LLC	Real Estate	EIN:		
11 Dexter St Providence, RI 02909-1203		From-To	2016 - 2018	
institutions, creditors, or other parties. No Yes. Fill in the details below.				
■ No □ Yes. Fill in the details below. Name	Date Issued			
■ No □ Yes. Fill in the details below.				
■ No □ Yes. Fill in the details below. Name Address				
No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below have read the answers on this Statement of the true and correct. I understand that making		obtaining mo	oney or property by fraud in connection	
No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below have read the answers on this Statement of the true and correct. I understand that making with a bankruptcy case can result in fines up 18 U.S.C. §§ 152, 1341, 1519, and 3571.	Date Issued of Financial Affairs and any attachments, and ang a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20 years.	obtaining mo	oney or property by fraud in connection	
No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below have read the answers on this Statement of the true and correct. I understand that making with a bankruptcy case can result in fines units a bankruptcy case can result in fines units U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kristin M Allard Kristin M Allard	Date Issued of Financial Affairs and any attachments, and ang a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20 years.	obtaining mo	oney or property by fraud in connection	
No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below have read the answers on this Statement of true and correct. I understand that making with a bankruptcy case can result in fines use 18 U.S.C. §§ 152, 1341, 1519, and 3571. Is/s/ Kristin M Allard Kristin M Allard Signature of Debtor 1 Date May 9, 2018	Date Issued of Financial Affairs and any attachments, and ang a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20 years. Signature of Debtor 2	obtaining mo ears, or both.	oney or property by fraud in connection	
No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below have read the answers on this Statement of true and correct. I understand that making with a bankruptcy case can result in fines use 18 U.S.C. §§ 152, 1341, 1519, and 3571. Is/s/ Kristin M Allard Kristin M Allard Signature of Debtor 1 Date May 9, 2018	Date Issued of Financial Affairs and any attachments, and ang a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20 yr Signature of Debtor 2 Date	obtaining mo ears, or both.	oney or property by fraud in connection	

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Debtor 1	Kristin M Allard			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba Case number	ankruptcy Court for the:	DISTRICT OF RHODE I	SLAND	
f known)				☐ Check if this is a amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.
- You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	<u>_</u>
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Kristin M Allard	Case number (if kn	own)
name: Descrip propert securin	y	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ Yes
For any ui	nexpired personal property lease that ormation below. Do not list real estat	erty Leases at you listed in Schedule G: Executory Contracts and Unex te leases. Unexpired leases are leases that are still in effect erty lease if the trustee does not assume it. 11 U.S.C. § 365	; the lease period has not yet ended.
Describe	your unexpired personal property le	eases	Will the lease be assumed?
Lessor's r Description Property:	on of leased		□ No □ Yes
Lessor's r Description Property:	on of leased		□ No □ Yes
Lessor's r Description Property:	on of leased		□ No □ Yes
Lessor's r Description Property:	on of leased		□ No □ Yes
Lessor's r Description Property:	on of leased		□ No □ Yes
Lessor's r Description Property:	on of leased		□ No □ Yes
Lessor's r Description Property:	on of leased		□ No
Part 3: Under per property t X /s/ F Kris	Sign Below	indicated my intention about any property of my estate that	Yes
Date		Date	

Fill in this infor	rmation to identify your case:		Ch	eck one box only as	directed in this form an	d in Form
Debtor 1	Kristin M Allard		122	2A-1Supp:		
Debtor 2				■ 1. There is no pre	selimntion of abuse	
(Spouse, if filing)				·	•	
United States	Bankruptcy Court for the: District of Rhode Is	sland	'		n to determine if a presu made under <i>Chapter 7</i>	
Case number				Calculation (C	Official Form 122A-2).	
(if known)					st does not apply now bary service but it could a	
				☐ Check if this is	an amended filing	
Official F	<u> </u>					
Chapter	7 Statement of Your Cur	rent Mor	nthly Inc	ome		12/15
attach a separat case number (if qualifying milita	and accurate as possible. If two married people a e sheet to this form. Include the line number to w known). If you believe that you are exempted fror ry service, complete and file Statement of Exemp alculate Your Current Monthly Income	hich the addition n a presumption	nal information a of abuse becau	applies. On the top of se you do not have p	any additional pages, wr rimarily consumer debts	ite your name and or because of
	your marital and filing status? Check one on	dv				
	narried. Fill out Column A, lines 2-11.	ııy.				
	ed and your spouse is filing with you. Fill ou	ıt hoth Columns	Δ and R lines	2-11		
_	ed and your spouse is NOT filing with you.		·	2-11.		
_	ing in the same household and are not lega	•	•	lumns A and B. line:	s 2-11.	
_	ing separately or are legally separated. Fill of	•		•		u declare under
per	nalty of perjury that you and your spouse are le ng apart for reasons that do not include evadir	egally separated	under nonban	kruptcy law that app	olies or that you and you	
101(10A). For the 6 months,	erage monthly income that you received from all a rexample, if you are filing on September 15, the 6-m, add the income for all 6 months and divide the total the same rental property, put the income from that p	onth period would by 6. Fill in the re	be March 1 throusult. Do not include	ugh August 31. If the arde any income amount	mount of your monthly incomore than once. For exam	me varied during ple, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	ess wages, salary, tips, bonuses, overtime, eductions).	and commission	ons (before all	\$ 2,190.61	\$	
	and maintenance payments. Do not include 3 is filled in.	payments from	a spouse if	\$ 0.00	\$	
of you or from an u and room	Ints from any source which are regularly par or your dependents, including child support. Inmarried partner, members of your household Inmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular I, your depende	contributions nts, parents,	\$0.00	\$	
5. Net inco	me from operating a business, profession,					
		\$ 0.00	tor 1			
	ceipts (before all deductions) and necessary operating expenses	-\$ 0.00 -\$				
,	and necessary operating expenses hly income from a business, profession, or fart	0.00	Copy here ->	\$ 0.00	\$	
	me from rental and other real property		.,		<u> </u>	
	2 22 2 2 2 2	Deb	tor 1			
	ceipts (before all deductions)	\$ 0.00				
	and necessary operating expenses	-\$ 0.00		• • •	•	
Net mont	hly income from rental or other real property	\$	Copy here ->		- :	
7. Interest,	dividends, and royalties			\$ 0.00	Ф	

Official Form 122A-1

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Page 44 of 54 Document Kristin M Allard Debtor 1 Case number (if known) Column A Column R Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 \$ benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 2.190.61 2.190.61 2. \$ each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 2,190.61 Multiply by 12 (the number of months in a year) **x** 12 26,287.32 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. RI Fill in the number of people in your household. 1 51,680.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Kristin M Allard Kristin M Allard

Signature of Debtor 1

Date May 9, 2018

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Debtor 1 Kristin M Allard Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2017 to 04/30/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Durham School Services

Constant income of \$2,190.61 per month.*

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Debtor 1 Kristin M Allard Case number (if known)

*Paycheck Details:

Durham School Services

Date	Earnings	Overtime	Taxes	Other	Net Check
2017-11-03	274.15	0.00	60.07	0.00	214.08
2017-11-09	236.94	0.00	49.79	0.00	187.15
2017-11-17	303.34	0.00	68.13	0.00	235.21
2017-11-22	261.42	0.00	56.54	0.00	204.88
2017-12-01	244.63	0.00	51.92	0.00	192.71
2017-12-08	635.46	0.00	159.78	0.00	475.68
2017-12-15	650.08	0.00	163.83	0.00	486.25
2017-12-22	883.58	0.00	239.22	0.00	644.36
2017-12-29	678.13	0.00	171.55	0.00	506.58
2018-01-05	256.02	0.00	55.05	0.00	200.97
2018-01-12	208.25	0.00	42.64	0.00	165.61
2018-01-19	753.98	0.00	192.50	0.00	561.48
2018-01-26	739.58	0.00	188.53	0.00	551.05
2018-02-02	720.80	0.00	162.43	0.00	558.37
2018-02-09	761.45	0.00	174.34	0.00	587.11
2018-02-16	654.85	0.00	148.25	0.00	506.60
2018-02-23	610.44	0.00	137.35	0.00	473.09
2018-03-02	426.37	0.00	92.26	0.00	334.11
2018-03-09	608.90	0.00	136.98	0.00	471.92
2018-03-16	594.30	0.00	133.40	0.00	460.90
2018-03-23	553.99	0.00	123.52	0.00	430.47
2018-03-30	446.97	0.00	97.30	0.00	349.67
2018-04-06	529.97	0.00	117.63	0.00	412.34
2018-04-13	555.04	0.00	123.78	0.00	431.26
2018-04-20	555.02	0.00	123.78	0.00	431.24
2018-05-04	486.94	0.00	107.09	0.00	379.85
Totals:	13,630.60	0.00	3,177.66	0.00	10,452.94

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

C	hapter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 1:18-bk-10820 Doc 1 Filed 05/09/18 Entered 05/09/18 18:03:12 Desc Main Document Page 51 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Rhode Island

In r	re Kristin M Allard		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR D	EBTOR(S)			
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filible rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy, of	or agreed to be paid	d to me, for services rendered or to			
	For legal services, I have agreed to accept		\$	2,000.00			
	Prior to the filing of this statement I have received		\$	2,000.00			
	Balance Due			0.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.						
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na						
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications 	the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; and filing of any petition, schedules, statement of affairs and plan which may be required; ion of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; isions as needed] tiations with secured creditors to reduce to market value; exemption planning; preparation and filing of rmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC (2)(A) for avoidance of liens on household goods.					
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.			ces, relief from stay actions or			
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of an bankruptcy proceeding.	ny agreement or arrangement for p	payment to me for	representation of the debtor(s) in			
_	May 9, 2018 Date	Isl Peter G. Berman, Signature of Attorney Raskin & Berman 116 East Manning Providence, RI 029 401-421-1363 Fax mail@raskinberman Name of law firm	Esquire 2030 Street 906 (: 401-272-4467				

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United States Bankruptcy Court District of Rhode Island

		District of Knoue Island			
In re Kristin M Alla	ard		Case No.		
		Debtor(s)	Chapter	7	
	VERIFICATION OF CREDITOR MATRIX				
he above-named Deb	tor hereby verifies that the	attached list of creditors is true and	d correct to the best	of his/her knowledge.	
Date: May 9, 2018		/s/ Kristin M Allard			
		Kristin M Allard			

Signature of Debtor

Allstate Insurance Company Attn: Bankruptcy Dept PO Box 4310 Carol Stream IL 60197-4310

Barclays Bank Delaware Attn: Bankruptcy Dept PO Box 8801 Wilmington DE 19899-8801

Citibank SD, N.A./Rosssmns Attn: Centralized Bankruptcy PO Box 790040 Saint Louis MO 63179-0040

Comenity Bank/Pottery Barn Attn: Bankruptcy Dept Po Box 182125 Columbus OH 43218-2125

Comenity Bank/Williams Visa Attn: Bankruptcy Dept Po Box 182125 Columbus OH 43218-2125

Credit Collection Services Attn: Bankruptcy Dept 725 Canton Street Norwood MA 02062

Diana E. Pearson, Esquire 1050 Main St #2 PO Box 178 East Greenwich RI 02818

Eastern Security Corporation 307 Branch Ave Providence RI 02904

First Credit Services Attn: Bankruptcy Dept 377 Hoes Lane Ste 200 Piscataway NJ 08854 Great Lakes Higher Ed Corp Attn: Bankruptcy Dept Po Box 7860 Nadison WI 53707-7860

Marc D. Wallick, Esquire WALLICK & ASSOCIATES, LTD. 51 Jefferson Blvd Ste 500 Warwick RI 02888-1070

National Grid Attn: Bankruptcy Dept PO Box 960 Northborough MA 01532-0960

Nordstrom FSB/TD Bank Attn: Bankruptcy Dept Po Box 6555 Englewood CO 80155-6555

Providence Tax Collector Law Department 444 Westminster St Ste 220 Providence RI 02903

Rhode Island Medical Imaging fka The Imaging Institute 20 Catamore Blvd East Providence RI 02914-1204

Shamrock Finance LLC Attn: Bankruptcy Dept 116 Topsfield Rd Wenham MA 01984

Verizon Wireless Attn: Bankruptcy Dept 500 Technology Dr Ste 550 Weldon Springs MO 63304

Work Out World-East Providence 1925 Pawtucket Ave East Providence RI 02914